



Massachusetts Health Care Cost Trends Final Report

Appendix C.1: Health Care Cost Trends Public Hearings Notice of Public Hearing

April 2010



Deval L. Patrick, Governor
Commonwealth of Massachusetts
Timothy P. Murray
Lieutenant Governor

JudyAnn Bigby, Secretary
Executive Office of Health and Human Services
David Morales, Commissioner
Division of Health Care Finance and Policy

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Secretary

TIMOTHY P. MURRAY
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DAVID MORALES
Commissioner

**HEALTH CARE COST TRENDS HEARINGS
AMENDMENTS TO PUBLIC NOTICE**

Pursuant to the provisions of M.G.L. c.118G, §6 ½ the Division of Health Care Finance and Policy (“Division”) will hold hearings on Tuesday, March 16; Thursday, March 18; and Friday, March 19, 2010 starting at 9:00 AM at the Joseph P. Healey Library University Club, 11th floor, University of Massachusetts Boston regarding:

HEALTH CARE PROVIDER AND PAYER COSTS AND COST TRENDS

Commissioner David Morales will preside over the hearings, which may be expected to continue through March 31, 2010. The Division shall call as witnesses a representative sample of providers and payers, including but not limited to those specified by the statute, who shall provide testimony under oath and subject to examination and cross examination by the Division and the Attorney General, as authorized by M.G.L. c. 118G, §§ 6 and 6 ½, regarding the factors that contribute to cost growth within the Commonwealth of Massachusetts’ health care system and to the relationship between provider costs and payer premium rates. The Division reserves the right to call other witnesses in furtherance of the statutory purpose of the hearings.

Testimony may include without limitation: (i) in the case of providers, testimony concerning payment systems, payer mix, cost structures, administrative and labor costs, capital and technology costs, adequacy of public payer reimbursement levels, reserve levels, utilization trends, and cost-containment strategies, the relation of private payer reimbursement levels to public payer reimbursements for similar services, efforts to improve the efficiency of the delivery system, efforts to reduce the inappropriate or duplicative use of technology; and (ii) in the case of private and public payers, testimony concerning factors underlying premium cost and rate increases, the relation of reserves to premium costs, the payer’s efforts to develop benefit design and payment policies that enhance product affordability and encourage efficient use of health resources and technology, efforts by the payer to increase consumer access to health care information, and efforts by the payer to promote the standardization of administrative practices, and any other matters as determined by the Division.

On the afternoon of Friday, March 19, 2010, the Division will accept oral testimony from members of the public. Any person who wishes to present comments is welcome to testify on a first-come, first-served basis for five minutes. Sign-ups will begin at 9:00 AM on Friday, March 19, 2010. As noted in the original Notice of Public Hearing, written testimony from the public is also welcome and may be posted on the Division’s website www.mass.gov/dhcfp.



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NOTICE OF PUBLIC HEARING

Pursuant to the provisions of M.G.L. c.118G, §6 ½ the Division of Health Care Finance and Policy (“Division”) will hold a public hearing beginning Tuesday March 16, 2010 at 10:00 AM at the Reggie Lewis Center, 1350 Tremont Street, Roxbury Crossing, MA 02120, and subsequent days thereafter regarding:

HEALTH CARE PROVIDER AND PAYER COSTS AND COST TRENDS

Commissioner David Morales will preside over the hearings, which may be expected to continue through March 31, 2010. The Division shall call as witnesses a representative sample of providers and payers, including but not limited to those specified by the statute, who shall provide testimony under oath and subject to examination and cross examination by the Division and the Attorney General, as authorized by M.G.L. c. 118G, §§ 6 and 6 ½, regarding the factors that contribute to cost growth within the Commonwealth of Massachusetts’ health care system and to the relationship between provider costs and payer premium rates. The Division reserves the right to call other witnesses in furtherance of the statutory purpose of the hearings.

Testimony may include without limitation: (i) in the case of providers, testimony concerning payment systems, payer mix, cost structures, administrative and labor costs, capital and technology costs, adequacy of public payer reimbursement levels, reserve levels, utilization trends, and cost-containment strategies, the relation of private payer reimbursement levels to public payer reimbursements for similar services, efforts to improve the efficiency of the delivery system, efforts to reduce the inappropriate or duplicative use of technology; and (ii) in the case of private and public payers, testimony concerning factors underlying premium cost and rate increases, the relation of reserves to premium costs, the payer’s efforts to develop benefit design and payment policies that enhance product affordability and encourage efficient use of health resources and technology, efforts by the payer to increase consumer access to health care information, and efforts by the payer to promote the standardization of administrative practices, and any other matters as determined by the Division.

The Division will schedule and accept oral testimony only from witnesses called by the Division; any member of the public may submit written testimony. All written testimony provided by witnesses or the public may be posted on the Division’s website: <http://www.mass.gov/dhcfp>.

Additional information regarding the hearings may be posted from time to time on the Division’s website.

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Publication Number: 10-116-HCF-04
Authorized by Ellen Bickelman, State Purchasing Agent

Printed on Recycled Paper